



MINUTES
ALABAMA DIABETES NETWORK (ADN) MEETING

September 18, 2013

The Alabama Diabetes Network coalition meeting was held at the Montgomery County Health Department located in Montgomery, Alabama. The following individuals were in attendance:

NETWORK MEMBERS	EX-OFFICIO MEMBERS (State Health Department Staff)
<p>Chris Anderson Tiana Brown Dr. Evelyn Crayton Elizabeth Dean Ted Gilbert Lee A. Griffin Ruby Henley Dana Herazo Dr. Alethia Hill Dr. Kimberly-Jo Kays Ingram Kay Melnick Kimberly McCoy Lannie Sears-Mitchell Ben Skala Nandi Spencer Brian E. Snell Dr. Mark Swanson</p>	<p>Diane Beeson Crystal Franklin Debra Griffin Elana Parker-Merriweather Dr. Jim McVay LaMont Pack Sondra Reese James K. Reid</p> <p>GUEST SPEAKERS</p> <p>Dr. Lekan Ayanwale Ellie Brooks Dr. Gabriel Z. Lott</p>

CALL TO ORDER/INTRODUCTIONS

The meeting was called to order by *LaMont Pack, P.A., M.P.A.*, at 9:17 a.m. The minutes were approved as printed, motioned and seconded by Ms. Lannie Sears-Mitchell and Ms. Kaye Melnick.

UPDATES/BUSINESS SESSION

Dr. Jim McVay, Director, Bureau of Health Promotion and Chronic Disease, stated he attended the State Board of Health meeting and reported that the level of health care is outstanding. The Emergency Management System in the state of Alabama is outstanding and provides quality service. The Alabama Department of Public Health received an award from the March of Dimes. Every new born infant will be given 31 tests before he or she leaves the hospital. Also, a test will be provided to every newborn to determine if a congenital heart defect is detectable. There have been ten children identified with heart defects and they are receiving an outstanding level of care.

Early detection is the key to providing quality of care. Dr. McVay informed that families applying for the Affordable Care Act will have insurance by 2014. Alabama is not participating in this process. State agencies were asked not to apply as of October 30. In order to qualify, one must fall between 100 percent of poverty level to 400 percent of poverty level. Medicaid will not be expanded in Alabama. The Federal Government will fund the program in the first three years. Dr. McVay ended by saying, we still have to provide health care needs for families and personal responsibility will be required.

James K. Reid, R.N., B.S.N., M.S., Director, Chronic Disease Branch, briefly mentioned the new 1305 Centers for Disease Control and Prevention (CDC) combined grant. Mr. Reid said Diabetes, Cardiovascular, Nutrition, and School Health programs are trying to maximize coalitions. This is important to the Diabetes Program and Community Linkages. Mr. Pack will explain more about the CDC 1305 grant later in the program.

Evelyn Crayton, Ed.D., Assistant Director, Family and Consumer Sciences, Auburn University, advised the new 1305 CDC grant will not provide the state with funding for Diabetes Today sites, partnering/collaborating, and dealing with a lot of uninsured people. We ask that you refer your diabetes patients to recognized American Diabetes Association and accredited American Association of Diabetes Educators Diabetes Self-Management Education (DSME) program sites. Also, Dr. Crayton stated there will be the 12th Annual Diabetes and Obesity Conference to be held in Montgomery November 8, 2013 or November 22, 2013. At the November conference, Dr. Mark Swanson will discuss the Diabetes Project at UAB. Next, Dr. Crayton mentioned that the work group breakout session on Access to Care, Education, Evaluation and Communication, and Quality of Life will be held differently today in order to address the strategies for the 1305 CDC grant.

LaMont Pack, P.A., M.P.A., Director, Diabetes Prevention and Control Program, greeted everyone and thanked them for attending, as well as, allowing time for introductions by all attendees. Next Mr. Pack stated that the new 1305 CDC grant started July 1, 2013. The combined grant includes Diabetes, Heart Disease and Stroke Prevention; Nutrition and Physical Activity and Obesity; and School Health. Plans are to focus on Nutrition and Physical Activity targeting public school teachers groups which consist of 20,000 individuals. The previous Diabetes Program CDC grant had nine months of the fifth year cancelled and all state funding for the Diabetes Program was terminated; therefore, Diabetes Today sites could not be funded. New direction of the CDC grant is pre-diabetes with a focus of bringing awareness to pre-diabetes, Type 2 Diabetes, Are you at Risk?, and Family Health History Quiz. When we breakout into work groups, we will concentrate on ways to encourage referring people with diabetes to ADA recognized and AADE accredited DSME programs. Then Mr. Pack went over all items in the ADN attendees' packet. Lastly, Mr. Pack mentioned during the November Diabetes and Obesity Conference, Mr. Wiley Mullins will share information about his program, Every Inch Matters, and the waist circumference tape measure he developed to educate Alabamians on diabetes and cardiovascular diseases risk factors.

Gabrial Lott, PharmD, GlaxoSmithKline, Inc., presented on Incidence of Hepatitis B and the Outbreaks, Transmission, Infection Control including Recommendations for Vaccination in Patients with Diabetes Mellitus. The presentation covered the outbreaks of Hepatitis B in patients with diabetes in institutions prompted the hepatitis vaccines work group of the Advisory Committee on Immunizations Practice (ACIP) to evaluate the risk for Hepatitis B Vaccine infection among all adults with diagnosed diabetes. Review of National Health and Nutrition Examination Survey data and CDC's Emerging Infection Programs data regarding prevalence and cases of patients with both

Hepatitis B and diabetes, review of transmission of Hepatitis B, review of ACIP and ADA recommendations regarding vaccination of adults with Type 1 and Type 2 Diabetes. Those individuals who may qualify for the vaccine include those of age, having obesity, a smoker, living with diabetes, and/or immune compromised individuals. Dr. Lott recommends to prevent decreases in effectiveness of the Hepatitis B Series, ACIP Recommendation and the ADA suggest administering the Hepatitis B series as recommended. The CDC now recommends Hepatitis B vaccination for appropriate adults with diabetes. Hepatitis B vaccination should be administered to unvaccinated adults with diabetes mellitus who are age 19 through 59 years. Hepatitis B vaccinations may be administered at the discretion of the treating clinician to unvaccinated adults with diabetes mellitus who are aged greater than or equal to 60 years of age. According to the CDC, administration of the vaccination series should be completed as soon as feasible after diabetes is diagnosed. Hepatitis virus can live up to seven days and hydrogen peroxide or a weakened chorine solution will kill the hepatitis virus.

Ellie Brooks, R.N., C.D.E., Diabetes Educator, Novo Nordisk, Pharmaceutical, Inc., discussed Diabetes Management and Weight Loss at the Diabetes Academy. Ms. Brooks stated the purpose of the academy is to help people living with diabetes know their values, understand and learn about foods, and when to monitor their blood sugar levels. The classes offered are one hour to one and a half hours. Next, Ms. Brooks explained how to complete the blue form for a cookbook. The orange form was used for the plate method. Then the plate used in teaching was shared. Ms. Brooks reminded us that we take better care of our cars than we do our bodies. The master degree in counseling helped her in the diabetes treatment component, as well as, the emotional component of diabetes counseling. In closing Ms. Brooks stated the focus should include stress, food, weight loss, and diabetes.

Evelyn Crayton, Ed.D., R.D., Assistant Director, Family and Consumer Sciences, Auburn University, discussed the Summer Health and Fitness Academy (SHAFa) project and reviewed the food groups. Dr. Crayton advised with weight loss we have to have a little patience and understand that our food is really healthy. Medications are a lot more effective when blood sugar levels are stable because insulin is a fat-storing hormone. There is a love-hate relationship with food. Next, the food guide was reviewed. It included 15-17 grams and added protein. Some people eat one meal a day, but we need to eat on a regular basis, six small meals so the body is not over loaded. Dr. Crayton concluded, for examples in a 1200 calorie meal plan don't count calories, count the carbohydrates.

Dr. Ayanwale, PhD, The Role of Tuskegee University Extension Program in the 13 Black Belt counties with SHAFa. The SHAFa project focused on the fourth-ninth grade kids. Alabama has a 32.2% Obesity Prevalence. There is a high prevalence of diabetes in the following black belt counties: Barbour, Bullock, Dallas, Greene, Hale, Lowndes, Macon, Marengo, Marshall, Montgomery, Perry, Wilcox, and Sumter. Each of the 13 Black-Belt counties that Tuskegee University Cooperative Extension program works with is where the county agents live and work. Some are staffers of the Auburn University (ACES) or Tuskegee University. These county agents meet with folks living in their counties on a daily basis. They meet in churches and attend county activities together. The agents can take pre-diabetic education to this clientele. Some of the county agents teach the National Diabetes Education Program (NDEP) The Road to Health. The county agents also go to schools with their education program and have used NDEP's Eagle Books diabetes prevention materials. They meet with children, some of which are obese and need intervention education. We will need the measure waist tape measures to determine the girth of our clientele.

The Tuskegee University Cooperative Extension Program (TUCEP) curriculum is the National Institute of Child Health and Human Development (Media Smart) Basic Science of Obesity. Some objectives of TUCEP is to provide youth and adults exposure to a variety of entrepreneurial curriculums, increase profitability and sustainability of small-scale farmers and landowners, to assist businesses and individuals with various planning techniques, enhance the leadership capability of individuals and community leaders, increase environmental awareness and promote responsible environmental stewardship, increase awareness among racial and ethnic minority groups, educate participants to change risk behaviors that may reduce chronic health disorders, teach participants to modify behaviors learned and to make positive behavioral changes, and provide professional training for extension personnel. TUCEP allowed us to reach 135 youth at SHAFA, 81 females and 54 males. The childhood obesity prevention camp's theme was, "Catching Them Young." Dr. Ayanwale further stated that six workshops were held.

WORK GROUPS (were held as one body)

Quality of Life

Access to Care

Education

Evaluation and Communication

NETWORK FEEDBACK

The following were the recommendations from the workgroups:

Recommendations from the Workgroups (BreakOut Groups):

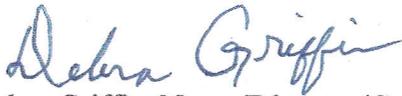
- Visit local kindergarten schools and teach about food portion size and carbs
- Visit housing projects to teach cooking classes and to develop menus and ways to budget
- BRFSS will collect diabetes and pre-diabetes data for the next five years
- Create interest at the hospital sites to promote some degree of prevention, or prevention awareness
- Partner with Human Resources associations in the state of Alabama to increase the number of employers who work on the business case to improve diabetes care and promote the awareness of pre-diabetes at the worksite with Diabetesatwork.org
- Utilize the e-mail system to increase educational outreach to health care professionals, update on revisions, offer resources
- Create a list of volunteer DSME educators
- Train primary care providers on DSME programs; increase the number of referrals to primary care providers
- Increase efforts to educate about pre-diabetes utilizing posters in the lobby (such as the County Department of Human Resources)

- Centralized reporting for accredited programs, UAB Diabetes Center, pre-diabetes educational materials for eye doctors, track the number of doctors requesting materials
- Do BMIs on children at exams, target children who are obese or have overweight BMIs, at well child exams or sick visits
- AllKids have in place nutrition education and follow-up visits with provider. We cover two visits with nutritionists who work directly with provider and four visits with provider for children with BMI greater than or equal to 95 percent
- Collaborate with county extension agents who are working in churches, schools, and communities to increase awareness of being overweight/obese and the connection to diabetes as well as pre-diabetes
- Encourage using the tape measure to increase awareness of central adiposity (Auburn University and Tuskegee ACES)
- Collaborate with the Tobacco Free Task Force to attend community events to increase awareness of pre-diabetes
- Offer communities an opportunity to increase pre-diabetes risk awareness in salons, churches, community organizations
- Have representatives to offer their services on specific dates or special occasions at libraries, community centers and mobile vans, etc.
- First quarter supply funding as a grant to help produce educational materials/advertising or awareness campaigns for pre-diabetes
- Partner with college radio stations for free radio coverage on pre-diabetes and with Alabama Public Television for commercial time or a brief program on pre-diabetes
- Increase the awareness of accredited DSME programs in the state (advertising, educational or awareness campaign)
- Collaborate with all DSME programs to prioritize activities to promote and recruit patients
- Increase the number of DSME programs in the state so that there is an accredited program within 20-mile radius of every citizen in Alabama
- Increase the awareness of case management benefit for diabetes disease management provided by insurance companies (Enroll on a volunteer basis by claims data)
- Increase awareness of the Transition of Care Programs that track contact members who have been hospitalized to make diabetes education referrals. Some resources are available, such as free glucometers and financial assistance with medication and follow-up calls are made as well

- Increasing public awareness of diabetes, getting people to take the disease seriously
- Increase involvement with the nursing programs at community colleges to manage diabetes as part of their training
- Write a letter to human resource departments to have them collaborate with insurance providers (Blue Cross/Blue Shield, AARP, United Health Care, Aetna, and others) in promoting NDEP diabetes and pre-diabetes prevention and control materials
- Increase involvement of employers in diabetes-prevention efforts
- Reach out through health fairs, CDC's The Power to Prevent family approach to diabetes prevention classes in the communities, utilizing the Affordable Care meetings to reach out to the uninsured to increase coverage, therefore allowing individuals a better opportunity to manage diabetes and/or pre-diabetes

Acknowledgement/Adjourn was conducted by Dr. Crayton, when no further comments were given.

Respectfully submitted:



Debra Griffin, Nurse Educator/Coordinator
Diabetes Program Coordinator/Educator



LaMont Pack
Community-Clinical Linkages Manager